

Please type a plus sign (+) inside this box → +

PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	121036-057
First Inventor	Iwao MORIYAMA et al.
Title	ACRYLIC ELASTOMER AND ITS COMPOSITION
Express Mail Label No.	EL591747916US

## APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.		8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>
3. <input checked="" type="checkbox"/> Specification <i>[Total Pages 19]</i>		a. <input type="checkbox"/> Computer Readable Form (CRF)
<ul style="list-style-type: none"> <li>- Descriptive title of the invention</li> <li>- Cross Reference to Related Applications</li> <li>- Statement Regarding Fed sponsored R &amp; D</li> <li>- Reference to sequence listing, a table, or a computer program listing appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings <i>(if filed)</i></li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul>		b. <input type="checkbox"/> Specification Sequence Listing on: <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li> <li>ii. <input type="checkbox"/> paper</li> </ul>
		c. <input type="checkbox"/> Statements verifying identity of above copies
<b>ACCOMPANYING APPLICATION PARTS</b>		
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))		
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <i>(when there is an assignee)</i> <input type="checkbox"/> Power of Attorney		
11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>		
12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations		
13. <input checked="" type="checkbox"/> Preliminary Amendment		
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>		
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>		
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.		
17. <input type="checkbox"/> Other:		

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

Continuation  Divisional  Continuation-in-part (CIP) of prior application No.: 09/741,254

Prior application information: Examiner \_\_\_\_\_ Group / Art Unit: \_\_\_\_\_

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

## 19. CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label	35684	or <input type="checkbox"/> Correspondence address below <i>(Insert Customer No. or Attach bar code label here)</i>
Name	Michael S. Gzybowski	
	BUTZEL LONG	
Address	350 South Main Street	
	Suite 300	
City	Ann Arbor	State MI Zip Code 48104
Country	USA	Telephone 734-995-3110 Fax 734-995-1777

Name (Print/Type)	Michael S. Gzybowski	Registration No. (Attorney/Agent)	32,816
Signature	<i>Michael S. Gzybowski</i>		Date July 16, 2003

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

22002 U.S. PTO  
10/6/2002  
07/16/03



16638 U.S. PTO  
07/16/03

PTO/SB/17 (1-03)

Approved for use through 04/30/2003. OMB 0651-0032  
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2003

Effective 01/01/2003. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27TOTAL AMOUNT OF PAYMENT (\$)  
**\$750.00**

## Complete if Known

Application Number	
Filing Date	July 16, 2003
First Named Inventor	Iwao MORIYAMA et al.
Examiner Name	
Group Art Unit	
Attorney Docket No.	121036-057

## METHOD OF PAYMENT (check all that apply)

 Check  Credit card  Money Order  Other  None  
 Deposit Account:

Deposit Account Number **12-2136**

Deposit Account Name **BUTZEL LONG**

The Commissioner is authorized to: (check all that apply)

 Charge fee(s) indicated below  Credit any overpayments  
 Charge any additional fee(s) during the pendency of this application  
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

## FEE CALCULATION (continued)

## 3. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	
1051 750	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non - English specification	
1812 2,520	1812 2,520	For filing a request for ex parte reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 410	2252 205	Extension for reply within second month	
1253 930	2253 465	Extension for reply within third month	
1254 1,450	2254 725	Extension for reply within fourth month	
1255 1,970	2255 985	Extension for reply within fifth month	
1401 320	2401 160	Notice of Appeal	
1402 320	2402 160	Filing a brief in support of an appeal	
1403 280	2403 140	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,300	2453 650	Petition to revive - unintentional	
1501 1,300	2501 650	Utility issue fee (or reissue)	
1502 470	2502 235	Design issue fee	
1503 630	2503 315	Plant issue fee	
Total Claims <b>3</b> -20** = <b>0</b> X <b>0.00</b> = <b>0.00</b>			
Independent Claims <b>1</b> - 3** = <b>0</b> X <b>0.00</b> = <b>0.00</b>			
Multiple Dependent			

## FEE CALCULATION

## 1. BASIC FILING FEE

Large Entity	Small Entity	Fee Description	Fee Paid
Fee Code (\$)	Fee Code (\$)	Fee Description	
1001 750	2001 375	Utility filing fee	<b>750.00</b>
1002 330	2002 165	Design filing	
1003 520	2003 260	Plant filing fee	
1004 750	2004 375	Reissue filing	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1) <b>( \$ )</b>		<b>\$750.00</b>	

## 2. EXTRA CLAIM FEES FOR UTILITY AND

Extra Claims	Fee from below	Fee Paid
Total Claims <b>3</b> -20** = <b>0</b> X <b>0.00</b> = <b>0.00</b>		
Independent Claims <b>1</b> - 3** = <b>0</b> X <b>0.00</b> = <b>0.00</b>		
Multiple Dependent		

## Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 84	2201 42	Independent claims in excess of 3
1203 280	2203 140	Multiple dependent claim, if not paid
1204 84	2204 42	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2) <b>( \$ )</b>		<b>\$0.00</b>

\*\*or number previously paid, if greater; For Reissues, see above

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) **( \$ )**

## SUBMITTED BY

Complete (if applicable)

Name (Print/Type)	Michael S. Gzybowski	Registration No. (Attorney/Agent)	32,816	Telephone	734-995-3110
Signature	<i>Michael S. Gzybowski</i>		Date	July 16, 2003	

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Washington, DC 20231.

If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.

**CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)**

Applicant(s): Iwa MORIYAMA et al.

Docket No.

121036-57

Serial No.

Filing Date

July 16, 2003

Examiner

Group Art Unit

Invention: **ACRYLIC ELASTOMER AND ITS COMPOSITION**

I hereby certify that the following correspondence:

**DIVISIONAL PATENT APPLICATION***(Identify type of correspondence)*

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

July 16, 2003*(Date)***Michael S. Gzybowski***(Typed or Printed Name of Person Mailing Correspondence)**(Signature of Person Mailing Correspondence)*EL591747916US*("Express Mail" Mailing Label Number)*

Note: Each paper must have its own certificate of mailing.